									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003										10691197					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									LEN	iTiTY	OR	OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			24					RATE		FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			24 minus 20=		. 4			X\$ 9			OR	XS18=	72		
INDEPENDENT CLAIMS			minus 3 =		•			X43=			OR	X86=	86		
		DENT CLAIM PE	RESENT								ľ	. 200-	<u> </u>		
								+14			OR	+290=	928		
<ul> <li>If the difference in column 1 is less than zero, enter "0" in column 2</li> </ul>									AĽ		OR	TOTAL			
CLAIMS AS AMENDED - PART II  OTHER 1 H  COLUMN 31 SMALL ENTITY OR SMALL ENTITY															
3-28-Do (Column 1) (Column 2) (Column 3) SMA  CLAIMS HIGHEST													ADDI-		
Ø		REMAINING.		NUM	BER	PRESENT	1	RATE	E	ADDI: TIONAL		RATE .	TIONAL		
Z	•	AFTER AMENDMENT		PREVI		EXTRA	1	"""		FEE			FEE		
AMENDMENT	Total	- 206	Minus	()	14		7	xs	9=		OR	XS18=			
EK	Independent	. 4	Minus	(	+	-	1	X4:	3=		OR	X86=			
AR	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	-			1				
									5=		OR	+290=			
•									TAL		OR	TOTAL ADDIT. FEE			
9	18-06							ADDIT.	FEE	I		ADDI1.1 CC			
0-	10 10	(Column 1)	<del>,</del>		imn 2) HEST	(Column 3	4			1 4001	1		ADDI-		
AMENDMENT B	· · · · · · · · · · · · · · · · · · ·	CLAIMS REMAINING		NUA	JBĘR	PRESENT		RATE	T=	ADDI- TIONAL	1	RATE	TIONAL		
		AFTER			IOUSLY	EXTRA			FEE	1 1	noi C	FEE			
	Trital	AMENDMENT . 74	Minus	AS S	GFOR J.L.	- /	7	xs	9=		OR	XS18=			
	Independent.	. 4	Minus		20	3	7	X-I			1_	X86=			
₹	•	NTATION OF M	IULTIPLE DEPENDEN		IT CLAIM	CLAIM		7 1-^-		<del> </del>	OR				
Щ	T INOT / TICOC							-14	5=		OR	+290=	ن		
									CTAL		OR	ADDIT, FEI			
									===			-00	-		
'Column 1' (Column 2' Column 3'													1 4001		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER MOUSLY D FOR	PRESENT	Ì	RA	TE	TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total		Minus	-			1	XS	9=		OF	XS18=			
	Independent		Mirus	-		2		X-	<u> </u>	1	OF	X86=			
Ā	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		+	Ⅎొ		1		
+145= OR												1			
If the entry in column 1 is less than the entry in column 2, wide "O" in column 3 TOTAL TOTAL											OF	ADDIT FE			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.", ADDIT FEE ADDIT FEE The "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3" The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1															
	The Highest Nur	nber Previously Pa	aid For" (Total o	or Indeper	rdenij is in	e highest nun	nber i	ound in	ive s	ppropriate o	w m c	٠ ١٠٠١٠			